### U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

<b>食素/育/4/2016年代公司第四日日本公司</b>					A CONTRACTOR OF CO	TO THE REAL PROPERTY.	Market (Mark)		AND SHOULD BE SHOWN	
PLAINTIPF Michael F	7. W.	lliam	s SR				# H	00	642	
CHY OF LORAIN, OH						TYPE OF PROCESS Summons and Complaint				
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE JESSE PERKINS SOT LORAIN TOLKE										
AT ADDRES	SS (Street or RFL	), Apartment No.,	, City, State and 2	ZIP Code) Z #7	11/ 1	ORAIN OF	4 4	105	^2_	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process to be served with this Form 285				
Michael A. Williams SR 2913 Devore CT						Number of parties to be served in this case  Check for service				
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,										
						C				
Signature of Attorney other Originator requesting service on behalf of:    PLAINTIFF   DEFENDANT					TELEPHONE NUMBER DA					
SPACE BI	ELOW FOR	USE OF U.S	. MARSHAL	ONLY - DO	NOT WRIT	TE BELOW THI	S LINE		10 minution in the contract of	
I acknowledge receipt for the total number of process indicated. 'Sign only for USM 285 if more than one USM 285 is submitted)	ber of process indicated. Origin Serve n only for USM 285 if more				athorized USMS	S Deputy or Clerk Date				
hereby certify and return that I $\square$ Individual, company, corporation, etc.	ave personally so, at the address sl	erved, D have nown above on the	legal evidence of he on the individu	service,  hav	e executed as sh poration, etc. sh	own in "Remarks", thown at the address ins	e process d	lescribed o	m the	
I hereby certify and return that I a	m unable to locat	e the individual,	company, comor	ation, etc. named	above (See rem	arks below)				
Name and title of individual served <i>(if not shown above)</i>					Date	Time	-	am pm.		
ddress (complete only different than shown above)					TO THE CONTRACT OF THE CONTRAC	Signature of U.S. Marshal or Deputy .				
		Costs s	hown on <u>attache</u>	d USMS Cost Sh	<u>eet</u> >>					
EMARKS										

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PLAINTIFF	1.011	^ ^ °				COURT CASE	NUMBER	00	642	
Michael A Williams SR.						THE OF DROC	Managa Ma Ma Managa Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma	- Cor		
DEFENDANT						TYPE OF PROCESS				
CITY OF LOKHIN, OHIO						Summons and Complaint				
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN										
SERVE Jack W. Bradley, Mayor										
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)										
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of proc				
2913 DOUDLE CT, KORAIN OH 44052					052	Number of parties to be				
2913 Devole CT, LORAIN OH 49032						served in this case				
Michael A Williams SR.						Check for service				
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):										
ZIL Zelephone I (who all a) and Zelevill		<i>j</i>								
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					T					
Signature of Attorney other Originator	r requesting serv	ice on behalf of:	☐ PLAII	NTIFF	TELEPHONE	E NUMBER DATE				
			11	NDANT						
			in and							
SPACE BE	LOW FOR	USE OF U.S.	. MARSHAL	ONLY - DO	NOT WRIT	E BELOW T	HIS LINE	C		
I acknowledge receipt for the total number of process indicated.	Total Process District of Origin		District to Serve	Signature of Au	Authorized USMS Deputy or Clerk Date					
(Sign only for USM 285 if more		No.	No.							
than one USM 285 is submitted)										
I hereby certify and return that I [ ] have personally served, [ ] have legal evidence of service, [ ] have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.										
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)										
Name and title of individual served (if not shown above)					Date	Time		☐ am ☐ pm		
Address (complete only different than shown above)						Signature of U.S. Marshal or Deputy				
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Costs shown on attached USMS Cost Sheet >>										
REMARKS										

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See "Instructions for Service of Process by U.S. Marshal"

Basement repeated growing works										
Michael F	). W	II.A.	ms Si	R,		COURT GASEN	UMBER.	0064		
DEFENDANT						TYPE OF PROCESS				
City of LORAIN OHIO						Summons an	d Complai	int		
NAME O	F INDIVIDUAL	сомрану, с	ORPORATION,	ETC. TO SERVE	OR DESCRIPT	ION OF PROPERTY	TO SEIZE	R CONDEMN		
SERVE Ja	Mes	<u> </u>	MCC	VUA	/ C	Hiet o	+ 1-c	DHICE		
AT ADDRES	S (Street or RFD	Apartment No.,	City, State and Z	IP Code) H 71L	1 LC	RAIN	DH 4	4052		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process		·-		
Michael F	1 u 1	11.1-01	10 5	R		served with this Form 285  Number of parties to be				
With the second						served in this case				
2913 Devore at						Check for service				
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):										
						C"				
Signature of Attorney other Originate	or reanesting serv	ice on behalf of:			TELEPHONE	NUMBER	DATE			
bighten of the bight of the bight			☐ PLAIR							
•			DEFE	NDANT						
SPACE BI	ELOW FOR	USE OF U.S.	MARSHAL	ONLY - DO	NOT WRIT	E BELOW TH	S LINE			
I acknowledge receipt for the total	Total Process	District of	District to	ľ	thorized USMS			Date		
number of process indicated.		Origin Serve								
(Sign only for USM 285 if more than one USM 285 is submitted)		No.	No.	•						
I hereby certify and return that I 1 individual, company, corporation, etc	nave personally so ., at the address sl	erved,  have nown above on t	legal evidence of he on the individu	service,  hav	e executed as sh poration, etc. sh	own in "Remarks", thown at the address ins	ne process desc serted below.	cribed on the		
I hereby certify and return that I a	m unable to locat	e the individual,	company, corpor	ation, etc. named	above (See remo	arks below)				
Name and title of individual served (if not shown above)						Date	Time	am pm.		
A 11						Signature of U.S. Marshal or Deputy				
Address (complete only different than shown above)						digitatine of O.S. Maishar of Deputy				
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Costs shown on attached USMS Cost Sheet >>										
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REMARKS										